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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* NONE \*\*\*\*\*\*\* FOREIGN APPLICATIONS \*\*\*\*\* NONE \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IA	SHEETS DRAWING 10	TOTAL CLAIMS <u>18-25</u>	INDEPENDENT CLAIMS 3
Verified and Acknowledged	Examiner's Signature <u>[Signature]</u> Initials <u>[Initials]</u>				

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## TITLE

Hand-held pointing device

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